#### FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE** 

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

LA ETHICS AND GAMPAIGN DISCLOSURE BE

2014 OCT 17 AM 9: 05

COMMITTEE NAME (Must be same as on Statement of Organ	ization)			and the same of th
BLUE FOR SUPERVISOR	1 1	FORM		
IMPORTANT: Indicate by # type of committee you are reporting for: [(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)(4)County Central Committee (5)County Candidate (6)City Candidate Subdivision Candidate (8)County PAC (9)City PAC (10)School Botto 11) Local Ballot Issue	State PAC (3)State Party ste (7)School Board or Other Political	(R	DR-2 dev. 12/2009) or Office Use On ornm. #	DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)	Sc	anned	
Office Sought	District (if Senate or House)	Au	dited	
Late reports are subject to possible civil and criminal penalties. Pursu candidate's committee, and the chairperson, for any other type of cor				
Karen Blue	712-623-4081	/	0/14/20 DATE SI	014
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	-	DATE SI	GNED
200000000000000000000000000000000000000		ing established		
IAM FILING A OCTOBER 19		processing.	ELECTION YEA	AR.
(report date)	Indicate by #			
CHECK IF AMENDMENT TO REPORT DATED		ocal Comn	nittees, enter Dat	e of Election
Check if this is final (termination) report and attach Notice of E (You must continue to file reports until a DR-3 is filed.)	10	ounty & Lo hich Electi	ocal Committees, on is held	enter County in
				AND THE RESERVE OF THE PARTY OF
STATEMENT OF CASH ON HAND				
STATEMENT OF CASH ON HAND  CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the cast of the last reporting period or must be zero if this is first	sh on hand at the end	2		0
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CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the case of the last reporting period or must be zero if this is first ADD TOTAL MONEY TAKEN IN THIS PERIOD	sh on hand at the end report filed.)			
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## For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

Reset Form	SCHEDULE	
	<b>A</b> (Rev. 12/13)	MONETARY RECEIPTS
		CK THIS BOX II

COMMITTEE	NAME	(Must be	same as on	Statement of	of Organization)
BLU	E	FOR	SUPE	RYISO	R

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

(MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FUND- RAISER
	ID#	LEO SMITH			INCOM
9/5/2014	CK#	1186 210 5%		4	
7 5/ 5011		RED OAK, IA 51566		5000	
	ID#	CIINT O LIVE TO COL		30	
Cel - 1 mil	CK#	CLINT & JULIE RUBEY			
9/17/2014		RED OAK, 1A 51566		1 000	
	ID#			10000	
01-	CK#	JUN & JAME WALTZ			
9/19/204		1202 N. 8 ST. RED OAK, IA 51566	1	= 0(20)	
	ID#			5000	
harad	CK#	BRYAN AMOS			
118/2014		2020 170 ST		10000	
	ID#	RED OAK, 1A 51366		10000	
71.02 12 21	CK#	DOHNA & SIM ROBINSON			
1/18/2014	0.07	VILLISCA, IA 50864		00	
	ID#			5000	
/19/2014	CK#	LARRY BRANDSTETTER			
11/1014		5 ROBIN HILL LAKE RED DAK, IA 51566		10000	
	ID#			10000	
19/2014	CK#	GURDON ARHOLD			
17/2017		RED OAK, IA 51566		3000	
	ID#			300	
12.2/2014	CK#	JIM SIFFORD SI68 S HWY 48			
75011				10000	
	ID#	RED DAK IA 51566	/	00	
1/10/2014	CK#	DON CASHATT		1	
1.7.5017		1219 IRENECT, REDOAK, IA 51566		400	
	ID#	, NOW CAR, 117 5/566		70 -	
	CK#			I	
					Market Annual Control
		•	SUB-TOTAL		A CONTRACTOR OF THE PARTY OF TH
		TOTAL (if last page of	\$		

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no Page \_\_/\_\_\_ of \_\_/\_\_ familial relationship, (for Schedule A)

Reset Form

### **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
(Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

<b>COMMITTEE NAME</b>	(Must be	same as on	Statement of Organization)
BLUE	FOR	SUP	ERVISOR

	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT
DATE EXPENDED	ID NUMBER (if applicable)	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRANSACTION)	EXPENDED
(MM/DD/YR)	AND PAC CHECK		5	-t-Millionin
	NUMBER			and the state of t
	ID#	RED OAK EXPRESS		
10/14/2014	CK#	POBOX 377	NEWSPAPER	\$206.32
, ,, ,		RED OAK, 1A 51566	ADVERTISING	\$ 206,00
	ID#			
	CK#			
	ID#			
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the second second second	CK#			
	ID#			
	CK#			
			American	
			SUB-TOTAL	\$

TOTAL (if last page of this schedule)

\$506.32

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

_	i	5
Page	l of	1

COMMITTEE NAME (Must be same as on Statement of Organization)		SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
BLUE FOR SUPERVISOR			
	Reset Form		CTHIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
9/4/2014	PCD CAN, 17 57)60	SELF	YAAD SIGNS	291.63	
10/03/2014	JULIE RUBEY RUBEY AULTION CO- 1600 N. BROADWAY RED OAK LA 51566		MAILER POSTAGE	64.02	
			3		
ś					
			SUB-TOTAL	\$	
			TOTAL (if last page of this schedule)	\$ 355.65	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ( of ( for Schedule E)